

ALABAMA ATHLETIC COMMISSION

5809 Feldspar Way, Suite 109 Birmingham, Alabama 35244 Phone: (205) 438-6205

WRESTLING

PROMOTER'S TICKET ACCOUNT FORM FOR TELEVISED AND BROADCASTED EVENTS

OFFICIAL USE by Alabama Athletic Commission

Acknowledgement of Receipt

_event held on_______, 20_____at

*NOTE: ANY PROMOTER WHO WILLFULLY FAILS, NEGLECTS, OR REFUSES TO MAKE A REPORT OR TO PAY THE FEES AS PRESCRIBED, OR WHO REFUSES TO ALLOW THE COMMISSION TO EXAMINE THE BOOKS, PAPERS, AND RECORDS OF ANY PROMOTION MAY RESULT IN CRIMINAL PROSECUTION.

Promoters of televised and/or broadcasted events shall **ATTACH** a printed Ticket Manifest that gives a breakdown of the number of tickets sold in each price range, the number of complimentary tickets issued and the revenue(s) made from televising and/or broadcasting the event.

The following is a statement of the tickets printed and the gross proceeds from ticket sales, television and/or broadcasting revenues

(PROMOTION NAME)	
(VENUE NAME & AD	DDRESS)
Calculating The Promoter	's Ticket Account Fee:
*Review the Chapter titled, "Licens	
PROMOTER'S TICKET ACCOUNT FEE: FEE IS CALCULATED AT SIX	<u> </u>
TELEVISION & BROADCASTING: FEE IS CALCULATED AT THREE P	
CAP: THE COMBINED TOTAL OF THE PROMOTER'S TICKET ACCOUNT	
FIFTY THOUSAND DOLLARS (\$50,000).	
> TICKET REVENUE:	
GROSS TICKET REVENUE:	\$
TOTAL DUE FOR PROMOTER'S TICKET ACCOUNT FEE:	
TOTAL DUE FOR FROMOTER'S HCRET ACCOUNT FEE:	\$(GROSS TICKET REVENUE x 6%)
> TELEVISION AND/OR BROADCASTING REVENUE:	
GROSS TV AND/OR BROADCASTING REVENUE:	\$
TOTAL DUE FOR TV AND/OR BROADCASTING FEE:	
101111111111111111111111111111111111111	\$(GROSS TV/BROADCASTING REVENUE x 3%)
> <u>SUBTOTAL DUE TO COMMISSION</u> :	\${(PROMOTER'S TICKET ACCT. FEE TOTAL + TV/BROADCASTING FEE TOTAL)}
	(PROMOTER'S TICKET ACCT. FEE TOTAL + TV/BROADCASTING FEE TOTAL)
> GRAND TOTAL DUE TO COMMISSION:	\$
*I swear and affirm that the information provided above is	s true and accurate to the best of my knowledge and belief.
•	• •
Promoter's Name: Signature Print	a
COMMISSION OFFICE	
The undersigned hereby certifies having received and reviewed this information	
Commission Approval: Signature Print	e:Date: